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to a collection of information unless it displays a valid OMB control number.

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CLAIMS AS FILED - PART I (Column 1) (Column 2)						SMALL ENTITY		OR <b>r</b>			
	rop		NUMBER FILED		EXTRA	RATE	FEE	- }	RATE -	<u>FEE</u>	
SIC F	FOR						\$	OR -		<u></u>	
7 CFR 1.16(a)) OTAL CLAIMS		minus 20 =				x \$=		OR	× \$=		
7 CFR 1.16(c))		minus 3 =				x \$=		OR	x \$=		
7 CFR 1.16(b))  ULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(d)).					+ \$=		OR	+ \$=			
						TOTAL		OR	TOTAL		
f the (	difference in colum				,						
CLAIMS AS AMENDED - PART II								OR	OR OTHER THAN SMALL ENTITY		
	(	Column 1)		(Column 2)	(Column 3)	SMALL E	NTITY	្រ			
<u> </u>		CLAIMS REMAINING AFTER	F	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
ᆰ	Total *	MENDMENT	Minus	20	=	x \$=	<u> </u>	OR	x \$=		
ᢖᡰᠯ	37 CFR 1.16(c))	<del></del>	Minus	4	-	× \$=	l 	OR	× \$=		
	(37 CFR 1.18(b))		DEDENOEN	T CLAIM (37 CE	R 1.16(d))	+5 =		OR	+\$=		
<u> </u>	FIRST PRESENTATI	ON OF MULTIPLE	DEPENDEN	Trebuil (o. c.		TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE		
		(Column 1)		(Column 2)	(Column 3)			1			
		CLAIMS REMAINING AFTER		HIGHEST NUMBER PREVIOUSLY	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI TIONA FEE	
핅	Total	AMENDMENT 2	Minus	PAID FOR_	=	X \$=		OR	x \$=	<u> </u>	
힑	(37 CFR 1.16(c))	<del>.                                    </del>	Minus	<del>   {</del>	<del>   </del>	x \$=	1	OR	x <b>\$</b> =		
AMENDMENT	(37 CFR 1.16(b))				\FD 4 46/d)\			OR	+\$=	l	
<	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))				A 15 11.19(9))	TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE		
				(O-1: 2)	(Column 3)	ADDETER		<b>-</b>			
		(Column 1) CLAIMS		(Column 2) HIGHEST	PRESENT	RATE	ADDI-	1	RATE	ADI	
NTC		REMAINING AFTER AMENDMENT		NUMBER PREVIOUSLY PAID FOR	EXTRA		TIONAL FEE	4		TION	
ΜĀ	Total (37 CFR 1.18(c))	*	Minus	**		× \$	<u>-</u>	OR	x \$=	+	
AMENDMENT	Independent (37 CFR 1.16(b))	•	Minus	***	<u> </u>	× s	<u> </u>	OR	× \$=	+	
AME	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))				CFR 1.16(d))	+ \$	<u> </u>	OR	+ \$=	<del>-  </del>	
<u> </u>	FIRST FREDERINGS ST.					TOTAL ADD'L FE	₌	OR	TOTAL ADD'L FEE		

\*\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".

\*\*\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".

\*\*\*\* If the "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

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